

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CLEARPATH ACTION, INC.

ADDRESS (number and street)

300 NEW JERSEY AVE NW #907

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00608943

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

11

08

2016

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

10

01

2016

through

M M /

D D /

Y Y Y Y Y Y

10

19

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

CROSBY, CALEB, , ,

Type or Print Name of Treasurer

Signature of Treasurer

CROSBY, CALEB, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

10

27

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CLEARPATH ACTION, INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
10		19		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
Y	Y	Y	Y	Y																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
2016																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**CLEARPATH ACTION, INC.**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		01		2016

To:

M M	/	D D	/	Y Y Y Y
10		19		2016

<b>I. Receipts</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	3650000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	3650000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	3650000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	0.00	3650000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	3650000.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	104577.71	940384.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	104577.71	940384.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	105000.00	205000.00
24. Independent Expenditures (use Schedule E) .....	651060.12	2208341.78
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	860637.83	3353726.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	860637.83	3353726.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	3650000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	3650000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	104577.71	940384.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	104577.71	940384.97

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**CLEARPATH ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. ANTHRO DIGITAL**

Mailing Address 455 1ST STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2016

FEC Identification Number

**C****Transaction ID : SB21B.4539**

Amount of Each Disbursement this Period

35000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANTHRO DIGITAL**

Mailing Address 455 1ST STREET

City  
BROOKLYNState  
NYZip Code  
11215Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2016

FEC Identification Number

**C****Transaction ID : SB21B.4540**

Amount of Each Disbursement this Period

40050.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRACEWELL**

Mailing Address PO BOX 848566

City  
DALLASState  
TXZip Code  
75284Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		12		2016

FEC Identification Number

**C****Transaction ID : SB21B.4538**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80050.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**CLEARPATH ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. CROSBY OTTENHOFF GROUP**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : SB21B.4534

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OLIVE TREE STRATEGIES,LLC**Mailing Address 2711 ORDWAY STREET NW  
#200City  
WASHINGTONState  
DCZip Code  
20008Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				07				2016					

FEC Identification Number

C

Transaction ID : SB21B.4533

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAE, LLC**

Mailing Address 626 NORTH CAROLINA AVE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING/TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				07				2016					

FEC Identification Number

C

Transaction ID : SB21B.4532

Amount of Each Disbursement this Period

13027.11

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

24527.11

TOTAL This Period (last page this line number only).....▶

104577.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**CLEARPATH ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. CONGRESSIONAL LEADERSHIP FUND**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		06		2016

Mailing Address 1747 PENNSYLVANIA AVENUE NW  
5TH FLOORCity  
WASHINGTONState  
DCZip Code  
20006Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00504530

**Transaction ID : SB23.4530**

Amount of Each Disbursement this Period

75000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ESAFUND**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		06		2016

Mailing Address 610 S. BOULEVARD

City  
TAMPAState  
FLZip Code  
33606Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00489856

**Transaction ID : SB23.4528**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SPIRIT OF DEMOCRACY AMERICA**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		11		2016

Mailing Address 455 CAPITOL MALL, SUITE 600

City  
SACRAMENTOState  
CAZip Code  
95814Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00521211

**Transaction ID : SB23.4537**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

105000.00

**TOTAL** This Period (last page this line number only).....▶

105000.00



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 9 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 29 / 2016		
Mailing Address 455 1ST STREET			Amount <span style="border: 1px solid black; padding: 2px;">15000.00</span>		
City BROOKLYN	State NY	Zip Code 11215	Transaction ID : <b>SE.4391</b>		
Purpose of Expenditure MEDIA PLACEMENT		Category/Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Name of Federal Candidate: DOLD, ROBERT JAMES JR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 10 State: IL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 29 / 2016		
Mailing Address 455 1ST STREET			Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
City BROOKLYN	State NY	Zip Code 11215	Transaction ID : <b>SE.4392</b>		
Purpose of Expenditure MEDIA PLACEMENT		Category/Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016		
Name of Federal Candidate: MEEHAN, PATRICK L. MR., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">35000.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature CROSBY, CALEB, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 10 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 05 / 2016</b>		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <b>30000.00</b>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <b>004</b>	Transaction ID : <b>SE.4421</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 05 / 2016</b>		
Name of Federal Candidate: <b>CURBELO, CARLOS, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>26</b> State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought <b>83719.12</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 06 / 2016</b>		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <b>20000.00</b>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <b>004</b>	Transaction ID : <b>SE.4422</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 05 / 2016</b>		
Name of Federal Candidate: <b>STEFANIK, ELISE M., , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>21</b> State: <b>NY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>106000.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<b>50000.00</b>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....					
(a) TOTAL Independent Expenditures .....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>CROSBY, CALEB, , ,</b> <div style="text-align: right;">[Electronically Filed]</div>			Date <b>10 / 27 / 2016</b>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 11 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>ANTHRO DIGITAL</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>455 1ST STREET</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>	
City <b>BROOKLYN</b>		State <b>NY</b>		Zip Code <b>11215</b>	
Purpose of Expenditure <b>MEDIA PLACEMENT</b>				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: <b>REED, THOMAS W II, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>23</b> State: <b>NY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">115433.35</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>ANTHRO DIGITAL</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>455 1ST STREET</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>	
City <b>BROOKLYN</b>		State <b>NY</b>		Zip Code <b>11215</b>	
Purpose of Expenditure <b>MEDIA PLACEMENT</b>				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: <b>COSTELLO, RYAN A, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>06</b> State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">72000.00</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">40000.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>CROSBY, CALEB, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">27</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 12 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4436</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>DOLD, ROBERT JAMES JR, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>10</b> State: <b>IL</b> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">87000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4437</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>KATKO, JOHN M, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>06</b> State: <b>NY</b> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">42000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">40000.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>CROSBY, CALEB, , ,</b> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>ANTHRO DIGITAL</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016							
Mailing Address <b>455 1ST STREET</b>				Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>							
City <b>BROOKLYN</b>		State <b>NY</b>		Zip Code <b>11215</b>							
Purpose of Expenditure <b>MEDIA PLACEMENT</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: <b>LOVE, MIA, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>UT</b>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">72000.00</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item <b>ANTHRO DIGITAL</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016							
Mailing Address <b>455 1ST STREET</b>				Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>							
City <b>BROOKLYN</b>		State <b>NY</b>		Zip Code <b>11215</b>							
Purpose of Expenditure <b>MEDIA PLACEMENT</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: <b>UPTON, FREDERICK STEPHEN, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>MI</b>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">20000.00</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">40000.00</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">40000.00</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">40000.00</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>CROSBY, CALEB, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 14 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 11 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">2000.00</span>		
Purpose of Expenditure <b>MEDIA PRODUCTION</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4440</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>UPTON, FREDERICK STEPHEN, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>06</b> State: <b>MI</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">22000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">14186.93</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4456</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>AYOTTE, KELLY A, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: <b>00</b> State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">14186.93</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">16186.93</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
CROSBY, CALEB, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">11714.57</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4459</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>DOLD, ROBERT JAMES JR, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>10</b> State: <b>IL</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">98714.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">19989.71</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4462</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>COFFMAN, MIKE, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>07</b> State: <b>CO</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">41989.71</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">31704.28</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>CROSBY, CALEB, , ,</b> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 13 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">12153.96</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4465</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>CURBELO, CARLOS, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>26</b> State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">95873.08</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 12 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">9435.78</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4468</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>REED, THOMAS W II, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>23</b> State: <b>NY</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">124869.13</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">21589.74</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>CROSBY, CALEB, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 27 / 2016		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 17 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">11192.26</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4471</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>DENHAM, JEFF, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>10</b> State: <b>CA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">63192.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">15835.49</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4474</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Name of Federal Candidate: <b>KATKO, JOHN M, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>06</b> State: <b>NY</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">57835.49</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">27027.75</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>CROSBY, CALEB, , ,</b> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2016		
Mailing Address 455 1ST STREET			Amount <span style="border: 1px solid black; padding: 2px;">35000.00</span>		
City BROOKLYN	State NY	Zip Code 11215	Transaction ID : <b>SE.4478</b>		
Purpose of Expenditure MEDIA PLACEMENT		Category/Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
Name of Federal Candidate: PORTMAN, ROB, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <b>ANTHRO DIGITAL</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
Mailing Address 455 1ST STREET			Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
City BROOKLYN	State NY	Zip Code 11215	Transaction ID : <b>SE.4481</b>		
Purpose of Expenditure MEDIA PLACEMENT		Category/Type 004	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
Name of Federal Candidate: AYOTTE, KELLY A, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">55000.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  CROSBY, CALEB, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 15 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4482</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2016		
Name of Federal Candidate: <b>MEEHAN, PATRICK L. MR., , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>07</b> State: <b>PA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">92000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">49815.71</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4487</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>BURR, RICHARD, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: <b>00</b> State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">486815.71</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">69815.71</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
CROSBY, CALEB, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">21037.10</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4488</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>CURBELO, CARLOS, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>26</b> State: <b>FL</b> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">116910.18</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">14698.61</span>		
Purpose of Expenditure <b>PRINTING / POSTAGE</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4489</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>UPTON, FREDERICK STEPHEN, ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>06</b> State: <b>MI</b> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">36698.61</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">35735.71</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
CROSBY, CALEB, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 17 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">16000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4496</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>DENHAM, JEFF, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>10</b> State: <b>CA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">79192.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">40000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4497</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>CURBELO, CARLOS, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>26</b> State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">156910.18</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">56000.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
CROSBY, CALEB, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 22 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4498</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>COFFMAN, MIKE, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>07</b> State: <b>CO</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">61989.71</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">15000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4499</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>PAULSEN, ERIK, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>03</b> State: <b>MN</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">67000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">35000.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>CROSBY, CALEB, , ,</b> _____			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 23 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">40000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4500</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>BURR, RICHARD, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">526815.71</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <b>ANTHRO DIGITAL</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>455 1ST STREET</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2016		
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11215</b>	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>		
Purpose of Expenditure <b>MEDIA PLACEMENT</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4501</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2016		
Name of Federal Candidate: <b>STEFANIK, ELISE M., , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">126000.00</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">60000.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>CROSBY, CALEB, , ,</b>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 24 OF 24  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>CLEARPATH ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608943	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>ANTHRO DIGITAL</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2016	
Mailing Address <b>455 1ST STREET</b>				Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>	
City <b>BROOKLYN</b>		State <b>NY</b>		Zip Code <b>11215</b>	
Purpose of Expenditure <b>MEDIA PLACEMENT</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>COSTELLO, RYAN A, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">92000.00</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>ANTHRO DIGITAL</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2016	
Mailing Address <b>455 1ST STREET</b>				Amount <span style="border: 1px solid black; padding: 2px;">18000.00</span>	
City <b>BROOKLYN</b>		State <b>NY</b>		Zip Code <b>11215</b>	
Purpose of Expenditure <b>MEDIA PLACEMENT</b>				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: <b>REED, THOMAS W II, , ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <b>23</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>NY</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">142869.13</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">38000.00</span>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(a) TOTAL</b> Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">651060.12</span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>CROSBY, CALEB, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	

[Electronically Filed]